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For DISPLAY AND CONTROL DEVICE FOR MEDICAL EQUIPMENT	Under the Paperwork Reduction Act of 1995, no persons are required	to respond to a collection	of information unless if disp	lays a valid Of	VIB control number,
Application Number 10/566,330-Conf. #5046 Filled September 11, 2006 For DISPLAY AND CONTROL DEVICE FOR MEDICAL EQUIPMENT Art Unit 2629 Examiner V. T. Lam This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee X One month (37 CFR 1.17(a)(1)) \$130 \$855 \$ 130.00 Two months (37 CFR 1.17(a)(2)) \$490 \$245 \$ Three months (37 CFR 1.17(a)(4)) \$1730 \$865 \$ 130.00 Four months (37 CFR 1.17(a)(4)) \$1730 \$885 \$ Five months (37 CFR 1.17(a)(5)) \$2350 \$1175 \$ A check in the amount of the fee is enclosed. X Payment by credit card. Form PTO-2038 teatherhed. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 23/2825 WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 WARNING: information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 WARNING: information on the state of the entire interest of their representative(s) are required. Submitt multiple forms If more than one signature is required, see below.	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)		
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For DISPLAY AND CONTROL DEVICE FOR MEDICAL EQUIPMENT Art Unit 2629	(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				
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ı	I hereby certify that this paper (along with any p system in accordance with § 1.6(a)(4).	
ı	Dated: January 29, 2010	signature: XIIIA K GALULU (Paula K. Fairweather)